

MONTANA INSURANCE CONTINUING EDUCATION LICENSEE WRITTEN CERTIFICATION

NAME OF INDIVIDUAL (As on license: first, middle, last name) _____

MONTANA LICENSE NUMBER(S) (Individual/Agency) _____

SOCIAL SECURITY NUMBER _____ **LICENSE LAPSE/RENEW BY DATE** _____

BUSINESS ADDRESS (Street Address) _____ **BUSINESS NAME** _____

(City, State, Zip Code) _____

BUSINESS MAILING ADDRESS (P. O. Box Number, City, Zip Code) _____ **PHONE** (_____) _____

MONTANA-APPROVED COURSES COMPLETED TO MEET MY REQUIREMENT

SPONSORING ORGANIZATION (COURSE PROVIDER)	MONTANA COURSE NUMBER	COURSE TITLE	CREDIT HOURS	DATE (mm/dd/yy) COMPLETED

I certify that the above information is correct and true, that I have had no administrative, civil or criminal actions taken against me by any legal entity or authority regarding licensure or fiduciary responsibility. If any action has been taken since my most recent Montana continuing education filing, a copy of the action is attached. I understand that a false statement is reason for license revocation, 33-17-1001, MCA.

Original Signature

Print Name

Date

BIENNIAL RENEWAL

Every insurance producer and consultant license includes a lapse or renew by date. Licensees must complete 24 credit hours of Montana-approved insurance continuing education and file certification of continuing education by that date or the insurance licensure will lapse.

LICENSE LAPSE/REINSTATEMENT

Licenses lapse for non-compliance, incomplete compliance or late compliance. There is no additional notification to licensees of license lapse. Lapsed licenses can be reinstated within 12 months of the license lapse/renew by date. A resident licensee will submit the required continuing education and continuing education form, a reinstatement form and the \$100 reinstatement fee to reinstate licensure.

EXTENSIONS

Licensees may request, in writing, an extension to complete required credits. The request must include the reasons for the request and documentation supporting the request.

CHANGE OF ADDRESS

Montana Insurance statutes require licensees to file any change of address with the department **within 30 days**. Send a letter to the Insurance Licensing Bureau with any business address correction or submit an address change on an Individual License Renewal, form 1225. Address corrections made on this CE-1 form will not be processed.

VOLUNTARY TERMINATION

Licensees who do not wish to complete continuing education requirements may voluntarily surrender their Montana insurance license. Send your license and a letter requesting license termination to the Insurance Licensing Bureau.

SUBMISSION REQUIREMENTS

Requirements

All resident insurance producers and consultants licensed in Montana must complete and file the continuing education requirements by the license lapse/renew by date that appears on individual insurance producer, consultant and surplus lines licenses.

Persons licensed for any of the lines of property, casualty, surety or title, life, health, disability, limited lines or personal lines insurance must complete 24 approved credit hours by the license lapse/renewal date.

Persons licensed to sell **only** the line of limited lines credit insurance (credit life and credit disability, IUI, GAP or other credit insurance) must complete 5 approved credit hours of courses in: credit life and credit disability insurance, ethics and/or insurance law by the license lapse/renew by date.

Every licensee must include a minimum of 1 approved credit hour of legislative changes in Montana insurance statutes and administrative rules as part of **each** biennial continuing education filing.

Fee

There is no resident continuing education filing fee.

Filing deadline

This form or on-line entry must be completed or shipped by the license lapse/renew by date.

The postmark, shipping or on-line entry date will determine on-time filing compliance. Licensees may use a delivery method that offers receipt verification to track delivery.

Montana

Insurance

Continuing

Education

Written

Licensee

Certification

Send completed forms to the:

Montana State Auditor's Office
Insurance Continuing Education Program
840 Helena Avenue
Helena, Montana 59601
Call or e-mail with questions:
(406) 444-2040 (within Montana) 800-332-6148
Visit our web site at: sao.mt.gov